

**A. Pricing Schedule**

<b>LINE ITEM (CLIN)</b>	<b>DESCRIPTION</b>	<b>PROPOSED ESTIMATED COST</b>
<b>Transition-in – Period of Performance:</b>		
0001	Transition In Period (A) <sup>a</sup>	
<b>Base Period – Period of Performance:</b>		
0002	Center Operations (A)	
0003	Center Operations Technical Performance Incentive Fee (A) 2.4% of CLIN 0002	
0004	Center Operations Cost Incentive Fee (A) 4.0% of CLIN 0002	
0005	Outreach/Admissions (C1)	
0006	Outreach/Admissions Technical Performance Incentive Fee (C1) 2.4% of CLIN 0005	
0007	Outreach/Admissions Cost Incentive Fee (C1) 4.0% of CLIN 0005	N/A
0008	Career Transition Services (C2)	
0009	Career Transition Services Technical Performance Incentive Fee (C2) 2.4% of CLIN 0008	
0010	Career Transition Services Cost Incentive Fee (C2) 4.0% of CLIN 0008	N/A

<sup>a</sup> Transition in shall be provided by offerors as directed in Section L.6, Instructions for Proposal Submission. However, the costs of the Transition in will not be a part of the offeror's evaluated cost for the purpose of the Government's Best Value, Trade-off determination.

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LINE ITEM (CLIN)	DESCRIPTION	PROPOSED
<b>Option Period #1 – Period of Performance:</b>		
1002	Center Operations (A)	
1003	Center Operations Technical Performance Incentive Fee (A)  2.4% of CLIN 1002	
1004	Center Operations Cost Incentive Fee (A)  4.0% of CLIN 1002	
1005	Outreach/Admissions (C1)	
1006	Outreach/Admissions Technical Performance Incentive Fee (C1)  2.4% of CLIN 1005	
1007	Outreach/Admissions Cost Incentive Fee (C1)  4.0% of CLIN 1005	
1008	Career Transition Services (C2)	
1009	Career Transition Services Technical Performance Incentive Fee (C2)  2.4% of CLIN 1008	
1010	Career Transition Services Cost Incentive Fee (C2)  4.0% of CLIN 1008	

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<b>LINE ITEM (CLIN)</b>	<b>DESCRIPTION</b>	<b>PROPOSED</b>
<b>Option Period #2 – Period of Performance:</b>		
2002	Center Operations (A)	
2003	Center Operations Technical Performance Incentive Fee (A)  2.4% of CLIN 2002	
2004	Center Operations Cost Incentive Fee (A)  4.0% of CLIN 2002	
<del>2005</del>	<del>Outreach/Admissions</del>	
2007	Outreach/Admissions Cost Incentive Fee (C1)  4% of CLIN 2005	
2008	Career Transition Services (C2)	
2009	Career Transition Services Technical Performance Incentive Fee (C2)  2.4% of CLIN 2008	
2010	Career Transition Services Cost Incentive Fee (C2)  4% of CLIN 2008	

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LINE ITEM (CLIN)	DESCRIPTION	PROPOSED
<b>Option Period #3 – Period of Performance:</b>		
3002	Center Operations (A)	
3003	Center Operations Technical Performance Incentive Fee (A)  2.4% of CLIN 3002	
3004	Center Operations Cost Incentive Fee (A)  3.6% of CLIN 3002	
3005	Outreach/Admissions (C1)	
3006	Outreach and Admissions Technical Performance Incentive Fee (A)  2.4% of CLIN 3005	
3007	Outreach and Admissions Cost Incentive Fee (A)  3.6% of CLIN 3005	
3008	Career Transition Services (C2)	
3009	Career Transition Services Technical Performance Incentive Fee (C2) 2.4% of CLIN 3008	
3010	Career Transition Services Cost Incentive Fee (C2) 3.6% of CLIN 3008	
<b>Transition-Out<sup>b</sup></b>		
4001	Transition-out	

<sup>b</sup> Transition out shall be provided by offerors as directed in Section L.6, Instructions for Proposal Submission. However, the costs of the Transition out will not be a part of the offeror's evaluated cost for the purpose of the Government's Best Value, Trade-off determination.

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***B. Cost Detail – Center Operations, Outreach and Admissions and Career Transition Services***

<b>COST DETAIL – CENTER OPERATIONS</b>								
<b>Cost Category</b>		<b>1<sup>st</sup> Base Year</b>	<b>2<sup>nd</sup> Base Year</b>	<b>Base Period Total Estimated Cost</b>	<b>Option Year 1</b>	<b>Option Year 2</b>	<b>Option Year 3</b>	<b>Five Year Total Estimated Cost</b>
1	Staff Salaries Excluding Fringe							
2	Fringe Benefits for Staff							
3	Staff Travel & Per Diem							
4	Consultants Costs							
5	Subcontract Costs							
6	Materials & Supplies							
7	Communications Costs							
8	All Other Direct Costs							
9	Total Estimated Direct Costs							
10	General and Administrative Costs (____%)							
11	Total Estimated Direct/Indirect Costs							
12	Technical Performance Incentive Fee 2.4%							
13	Cost Incentive Fee 4.0%							
14	Total Estimated Cost Including Technical Performance and Cost Incentive Fees							

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COST DETAIL – OUTREACH AND ADMISSIONS								
Cost Category		1 <sup>st</sup> Base Year	2 <sup>nd</sup> Base Year	Base Period Total Estimated Cost	Option Year 1	Option Year 2	Option Year 3	Five Year Total Estimated Cost
1	Staff Salaries Excluding Fringe							
2	Fringe Benefits for Staff							
3	Staff Travel & Per Diem							
4	Consultants Costs							
5	Subcontract Costs							
6	Materials & Supplies							
7	Communications Costs							
8	All Other Direct Costs							
9	Total Estimated Direct Costs							
10	General and Administrative Costs (____%)							
11	Total Estimated Direct/Indirect Costs							
12	Technical Performance Incentive Fee							
13	Cost Incentive Fee							
14	Total Estimated Cost Including Technical Performance and Cost Incentive Fees							

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<b>COST DETAIL – CAREER TRANSITION SERVICEES</b>								
<b>Cost Category</b>		<b>1<sup>st</sup> Base Year</b>	<b>2<sup>nd</sup> Base Year</b>	<b>Base Period Total Estimated Cost</b>	<b>Option Year 1</b>	<b>Option Year 2</b>	<b>Option Year 3</b>	<b>Five Year Total Estimated Cost</b>
1	Staff Salaries Excluding Fringe							
2	Fringe Benefits for Staff							
3	Staff Travel & Per Diem							
4	Consultants Costs							
5	Subcontract Costs							
6	Materials & Supplies							
7	Communications Costs							
8	All Other Direct Costs							
9	Total Estimated Direct Costs							
10	General and Administrative Costs (____%)							
11	Total Estimated Direct/Indirect Costs							
12	Technical Performance Incentive Fee							
13	Cost Incentive Fee							
14	Total Estimated Cost Including Technical Performance and Cost Incentive Fees							

**C. Fringe Benefits**

<b>FRINGE BENEFITS – CENTER OPERATIONS</b>		<b>%</b>	<b>1<sup>st</sup> Year Pay Base (a)</b>	<b>2<sup>nd</sup> Year Pay Base (b)</b>	<b>Fringe 1<sup>st</sup> Year (%*a)</b>	<b>Fringe 2<sup>nd</sup> Year (%*b)</b>
1	Unemployment Insurance		\$	\$	\$	\$
2	FICA		\$	\$	\$	\$
3	Worker's Compensation		\$	\$	\$	\$
4	Health Insurance		\$	\$	\$	\$
5	Dental Insurance		\$	\$	\$	\$

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6	Life Insurance		\$	\$	\$	\$
7	Retirement/Pension		\$	\$	\$	\$
8	Other (Specify)		\$	\$	\$	\$
9	Total Costs of Fringe Benefits		\$	\$	\$	\$
<b>ADDITIONAL INFORMATION</b>						
10	Estimated Overtime/Holiday Premium Pay				\$	\$
11	Estimated Night Differential				\$	\$
12	Number of Staff Paid Holidays					
13	Estimated Total Number Staff Vacation Days					



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FRINGE BENEFITS		%	OY1 Pay Base	Fringe OY 1	%	OY2 Pay Base	Fringe OY 2	%	OY3 Pay Base	Fringe OY 3
1	Unemployment Insurance		\$	\$		\$	\$		\$	\$
2	FICA		\$	\$		\$	\$		\$	\$
3	Worker's Compensation		\$	\$		\$	\$		\$	\$
4	Health Insurance		\$	\$		\$	\$		\$	\$
5	Dental Insurance		\$	\$		\$	\$		\$	\$
6	Life Insurance		\$	\$		\$	\$		\$	\$
7	Retirement/Pension		\$	\$		\$	\$		\$	\$
8	Other (Specify)		\$	\$		\$	\$		\$	\$
9	Total Costs of Fringe Benefits			\$			\$			\$
<b>ADDITIONAL INFORMATION</b>										
10	Estimated Overtime/Holiday Premium Pay			\$			\$			\$
11	Estimated Night Differential			\$			\$			\$
12	Number of Staff Paid Holidays									
13	Estimated Total Number Staff Vacation Days									

**COST DETAIL TEMPLATE – ATTACHMENT J-1**

<b>FRINGE BENEFITS – OUTREACH AND ADMISSIONS</b>		<b>%</b>	<b>1<sup>st</sup> Year Pay Base (a)</b>	<b>2<sup>nd</sup> Year Pay Base (b)</b>	<b>Fringe 1<sup>st</sup> Year (%*a)</b>	<b>Fringe 2<sup>nd</sup> Year (%*b)</b>
1	Unemployment Insurance		\$	\$	\$	\$
2	FICA		\$	\$	\$	\$
3	Worker's Compensation		\$	\$	\$	\$
4	Health Insurance		\$	\$	\$	\$
5	Dental Insurance		\$	\$	\$	\$
6	Life Insurance		\$	\$	\$	\$
7	Retirement/Pension		\$	\$	\$	\$
8	Other (Specify)		\$	\$	\$	\$
9	Total Costs of Fringe Benefits		\$	\$	\$	\$
<b>ADDITIONAL INFORMATION</b>						
10	Estimated Overtime/Holiday Premium Pay				\$	\$
11	Estimated Night Differential				\$	\$
12	Number of Staff Paid Holidays					
13	Estimated Total Number Staff Vacation Days					

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<b>FRINGE BENEFITS</b>		<b>%</b>	<b>OY1 Pay Base</b>	<b>Fringe OY 1</b>	<b>%</b>	<b>OY2 Pay Base</b>	<b>Fringe OY 2</b>	<b>%</b>	<b>OY3 Pay Base</b>	<b>Fringe OY 3</b>
1	Unemployment Insurance		\$	\$		\$	\$		\$	\$
2	FICA		\$	\$		\$	\$		\$	\$
3	Worker's Compensation		\$	\$		\$	\$		\$	\$
4	Health Insurance		\$	\$		\$	\$		\$	\$
5	Dental Insurance		\$	\$		\$	\$		\$	\$
6	Life Insurance		\$	\$		\$	\$		\$	\$
7	Retirement/Pension		\$	\$		\$	\$		\$	\$
8	Other (Specify)		\$	\$		\$	\$		\$	\$
9	Total Costs of Fringe Benefits			\$			\$			\$
<b>ADDITIONAL INFORMATION</b>										
10	Estimated Overtime/Holiday Premium Pay			\$			\$			\$
11	Estimated Night Differential			\$			\$			\$
12	Number of Staff Paid Holidays									
13	Estimated Total Number Staff Vacation Days									

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FRINGE BENEFITS – CAREER TRANSITION SERVICES		%	1 <sup>st</sup> Year Pay Base (a)	2 <sup>nd</sup> Year Pay Base (b)	Fringe 1 <sup>st</sup> Year (%*a)	Fringe 2 <sup>nd</sup> Year (%*b)
1	Unemployment Insurance		\$	\$	\$	\$
2	FICA		\$	\$	\$	\$
3	Worker's Compensation		\$	\$	\$	\$
4	Health Insurance		\$	\$	\$	\$
5	Dental Insurance		\$	\$	\$	\$
6	Life Insurance		\$	\$	\$	\$
7	Retirement/Pension		\$	\$	\$	\$
8	Other (Specify)		\$	\$	\$	\$
9	Total Costs of Fringe Benefits		\$	\$	\$	\$
<b>ADDITIONAL INFORMATION</b>						
10	Estimated Overtime/Holiday Premium Pay				\$	\$
11	Estimated Night Differential				\$	\$
12	Number of Staff Paid Holidays					
13	Estimated Total Number Staff Vacation Days					

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FRINGE BENEFITS		%	OY1 Pay Base	Fringe OY 1	%	OY2 Pay Base	Fringe OY 2	%	OY3 Pay Base	Fringe OY 3
1	Unemployment Insurance		\$	\$		\$	\$		\$	\$
2	FICA		\$	\$		\$	\$		\$	\$
3	Worker's Compensation		\$	\$		\$	\$		\$	\$
4	Health Insurance		\$	\$		\$	\$		\$	\$
5	Dental Insurance		\$	\$		\$	\$		\$	\$
6	Life Insurance		\$	\$		\$	\$		\$	\$
7	Retirement/Pension		\$	\$		\$	\$		\$	\$
8	Other (Specify)		\$	\$		\$	\$		\$	\$
9	Total Costs of Fringe Benefits			\$			\$			\$
<b>ADDITIONAL INFORMATION</b>										
10	Estimated Overtime/Holiday Premium Pay			\$			\$			\$
11	Estimated Night Differential			\$			\$			\$
12	Number of Staff Paid Holidays									
13	Estimated Total Number Staff Vacation Days									

***D. Indirect Costs***

The proposed indirect costs under this contract are as follows:

Indirect Cost	Base of Allocation	Rate for each Contract Year				
		1	2	3	4	5
G&A	In accordance with contractor's negotiated and approved Indirect Cost Rate Agreement, also excluding CRA, equipment, and CTST.					
Overhead <input type="checkbox"/> Applicable <input type="checkbox"/> Not Applicable	Total Direct Salaries and Wages ( <input type="checkbox"/> including/ <input type="checkbox"/> excluding fringe benefits)					

**Ceiling Indirect Rates or Ceiling Amounts** - The Contracting Officer will impose the contractor's administrative cost limitations (ceilings) regarding the contract based on the documentation received. Please note that these "ceilings" do not exclude your organization from the responsibility of submitting an indirect cost rate proposal(s) for approval.

The contractor's proposed G&A ceiling rate: \_\_\_\_ %.

***E. Option to Extend Services***

In the event that the Government chooses to exercise contract clause 52.217-8, Option to Extend Services, estimated costs for each month of the six month Option are as follows below. Please note that under the Option to Extend Services, the contractor shall receive a technical performance incentive fee and a cost incentive fixed fee on total direct and indirect costs, excluding CRA, equipment, CTST, and demonstration projects:

52.217-8, Option to Extend Services						
Description	Month 1	Month 2	Month 3	Month 4	Month 5	Month 6
Center Operations (A)						
Center Operations Technical Performance Incentive Fee 2.4%						
Center Operations Cost Incentive Fee 4%						
Outreach/Admissions (C1)						
Outreach/ Admissions Technical Performance Incentive Fee 2.4%						
Outreach/ Admissions Cost Incentive Fee 4%						
Career Transition Services (C2)						
Career Transition Services Technical Performance Incentive Fee – 2.4%						
Career Transition Services Cost Incentive Fee – 3.6%						
<b>Total, all costs including fees</b>						

**F. Liquidated Damages**

The following table shall be used for the purpose of calculating the Student Per Year Cost and Student Per Day Cost, as applied in Section G.8, Liquidated Damages for Failure to Comply with Regulations for Separating Students/Issuing Leaves and Section G.9, Liquidated Damages for Ineligible Enrollment.

Period of Performance	Total Estimated Cost (excluding OA, CTS, CRA, equipment, and CTST)	OBS	Student Per Year Cost (Total Estimated Cost/OBS)	Student Per Day Cost (Student Year Cost/365*15%)
Base Year One	\$			
Base Year Two	\$			
Option Year One	\$			
Option Year Two	\$			
Option Year Three	\$			
Average	\$			

**G. Incentive Fees**

The following table shall be used for the purpose of proposing the technical and cost incentives.

**Center Operations:**

Contract Year	Minimum Cost Incentive Fee (3.0%)	Minimum Technical Performance Incentive Fee (0%)	Average Technical Performance Incentive Fee (1.2%)	Maximum Performance Incentive Fee (2.4%)	Maximum Technical Performance Excellence Bonus (.44%)
1					
2					
3					
4					
5					

**Outreach/Admissions (OA):**

Contract Year	Minimum Cost Incentive Fee (3.0%)	Minimum Technical Performance Incentive Fee (0%)	Average Technical Performance Incentive Fee (1.2%)	Maximum Technical Performance Incentive Fee (2.4%)	Maximum Technical Performance Excellence Bonus (.44%)
1					
2					
3					
4					

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**Career Transition Services (CTS):**

<b>Contract Year</b>	<b>Minimum Cost Incentive Fee (3.0%)</b>	<b>Minimum Technical Performance Incentive Fee (0%)</b>	<b>Average Technical Performance Incentive Fee (1.2%)</b>	<b>Maximum Technical Performance Incentive Fee (2.4%)</b>	<b>Maximum Technical Performance Excellence Bonus (.44%)</b>
1					
2					
3					
4					
5					

**Cost Incentive Fee:**

<b>Term</b>	<b>Definition of Term</b>	<b>Center Operations</b>	<b>OA</b>	<b>CTS</b>
Target Cost	Contractor's current contract year's estimated operations cost (i.e., that contract year's approved operations budget as shown on form 2181 within FMS), excluding fees, CRA (CLIN 5001), equipment (CLIN 5002), CTST (CLIN 5003), and demonstration projects (5004).	Base Year One: Base Year Two: Option Year One: Option Year Two: Option Year Three:	Base Year One: Base Year Two: Option Year One: Option Year Two: Option Year Three:	Base Year One: Base Year Two: Option Year One: Option Year Two: Option Year Three:
Actual Cost	The actual operations costs incurred by the contract as a result of contract performance (i.e., as shown on form 2110), excluding fees, CRA (CLIN 5001), equipment (CLIN 5002), CTST (CLIN 5003), and demonstration projects (5004)	Base Year One: Base Year Two: Option Year One: Option Year Two: Option Year Three:	Base Year One: Base Year Two: Option Year One: Option Year Two: Option Year Three:	Base Year One: Base Year Two: Option Year One: Option Year Two: Option Year Three:



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	Definition of Term	Center Operations	OA	CTS
Minimum Cost Incentive Fee	<p>Minimum Cost Incentive Fee = 3.0% of total direct and indirect costs, excluding fees, CRA (CLIN 5001), equipment (CLIN 5002), CTST (CLIN 5003), and demonstration projects (5004).</p> <p><b>Please note that the minimum cost incentive fee operates in the same way as a fixed fee and therefore, the dollar amount of the minimum fee <u>does not</u> increase as the contractor's costs increase, unless approved by the Contracting Officer.</b></p> <p>Contractor's minimum cost incentive fee of 2% may be <u>unilaterally</u> reduced to 0% by the Contracting Officer if the contractor's actual costs exceed the target cost by greater than 10%.</p>	Base Year One: Base Year Two: Option Year One: Option Year Two: Option Year Three:	Base Year One: Base Year Two: Option Year One: Option Year Two: Option Year Three:	Base Year One: Base Year Two: Option Year One: Option Year Two: Option Year Three:
Maximum Cost Incentive Fee	<p>Maximum Cost Incentive Fee Possible = 4% of total direct and indirect costs, excluding fees, CRA (CLIN 5001), equipment (CLIN 5002), CTST (CLIN 5003), and demonstration projects (5004).</p>	Base Year One: Base Year Two: Option Year One: Option Year Two: Option Year Three:	Base Year One: Base Year Two: Option Year One: Option Year Two: Option Year Three:	Base Year One: Base Year Two: Option Year One: Option Year Two: Option Year Three:

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<b>Target Cost Incentive fee</b>  This is the cost incentive fee that the contractor earns if the contractor's actual costs are equal to the Target Cost	3.5% of total direct and indirect costs, excluding fees, CRA (CLIN 5001), equipment (CLIN 5002), CTST (CLIN 5003), and demonstration projects (5004).	Base Year One: Base Year Two: Option Year One: Option Year Two: Option Year Three:	Base Year One: Base Year Two: Option Year One: Option Year Two: Option Year Three:	Base Year One: Base Year Two: Option Year One: Option Year Two: Option Year Three:
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<b>Term</b>	<b>Definition of Term</b>	<b>Center Operations</b>	<b>OA</b>	<b>CTS</b>
Cost Overrun and Cost Underrun variances	<p>A cost overrun variance occurs when actual operations cost is more than the budgeted cost in a given contract year.</p> <p>A cost underrun variance occurs when actual operations cost is less than the budgeted cost in a given contract year.</p> <p>The contract year's variance will be reported on the form 2110.</p>			
Fee Adjustment Formula – used to calculate Cost Incentive Fee Earned	<p>Cost Sharing Ratio for cost overruns = 50% Government / 50% Contractor</p> <p>Benefit Ratio for cost underruns = 50% Government / 50% Contractor</p>			
Calculation of the Final Cost Incentive Fee earned (see Note 2)	Final Cost Incentive Fee = Target Cost Incentive Fee + /- (Cost Underrun or Cost Overrun variance * Contractor Share) (see Note 2)	Base Year One: Base Year Two: Option Year One: Option Year Two: Option Year Three:	Base Year One: Base Year Two: Option Year One: Option Year Two: Option Year Three:	Base Year One: Base Year Two: Option Year One: Option Year Two: Option Year Three:

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**Note 1:** In accordance with cost reporting requirements as found in Appendices 502 and 503 of the PRH.

**Note 2:** The Final Cost Incentive Fee earned will not be less than 2.0% of total direct and indirect costs (minimum cost incentive fee) and not more than 4% of total direct and indirect costs (maximum cost incentive fee). Contractor's minimum cost incentive fee of 2% may be unilaterally reduced to 0% by the Contracting Officer if the contractor's Actual costs exceed the Target cost by greater than 10%.